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ABSTRACT

Three major premises form the basis of the recommendations of Forum 13. First, the traditional definition of injury should be expanded to include psychological, sociological, and environmental factors leading to children's injuries. Second, approaches to preventing and treating injuries cannot be separated from the environments with which children constantly interact. Third, children must be given higher priority, both by government and private enterprise, at all levels throughout the nation. The following recommendations are made: (1) that governmental units closest to the neighborhood select persons to be trained in problem-solving techniques and informed about available resources related to children's injuries; (2) that governments, aided by private and volunteer organizations, develop programs of training and ongoing consultation for those community workers; (3) that a cabinet level position with major responsibility for children and youth be considered; and (4) that Congress establish a permanent staff to study problems related to children and their environments. (Author/NH)

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CHILDREN WHO ARE INJURED

Report of Forum 13

1970 White House Conference on Children

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SUMMARY

Over 82,000 children alive in 1960 are now dead as a result of accidents, the number one killer of children under fifteen. The recommendations of Forum 13 are based on three major premises. First, the traditional definition of injury should be expanded to include psychological, sociological, and environmental factors leading to children's injuries. Second, approaches to preventing and treating injuries cannot be separated from the environments with which children constantly interact. Third, children must be given higher priority -- both by government and private enterprise -- at all levels throughout the nation.

So decisions made by counties, cities, and townships will protect the nation's children from our increasingly hostile environments, communities must be supported with commitments and assistance from all people in all positions of higher influence and leadership. Therefore, Forum 13 recommends:

- that governmental units closest to the neighborhood select individuals to be trained in problem-solving techniques and informed about available resources related to children's injuries;
- that state and federal governments, actively aided by private and volunteer organizations, develop programs of training and ongoing consultation for these selected community workers;

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- that the executive branch investigate the feasibility of a cabinet level position with major responsibility for the nation's children and youth;
- that Congress establish a nonpartisan, nonelective permanent staff to study problems related to American children and the environments in which they live.

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CURRENT STATUS

Over 82,000 children alive in 1960 are now dead as a result of accidents, the number one killer of children under fifteen.[1] For this age group, "accidents claim more lives than the six leading diseases combined."[2] And physical injuries have left far greater numbers of children impaired and disabled. But even the millions of children included in various accident and injury statistics do not reflect the complexity and severity of the injury issue.

"Injury" has traditionally been characterized as having a measurable consequence or visible symptom, being immediate rather than cumulative, and resulting from a known agent such as fire or water. This working definition must be expanded to include psychological or social impairments or stress which are often produced by our complex environment and do not necessarily manifest themselves in visible forms.

In the 1960's, America's physical and mental environment became one of the most complex in its history. It was a decade of moon walks, campus unrest, crime, computers, civil rights, drug abuse, heart transplants, birth control, war, and pollution. Millions of our children who grew up in the sixties are now in colleges, universities, and trade schools; some never finished high school and "dropped out." While most are living and working

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[1]National Safety Council.

[2]Iskrant, Joliet. Accidents and Homicide. Harvard University Press, 1968.

within American society, a few are so disillusioned by this society that they are actively working toward its destruction. Still others have formed miniature societies of their own called "communes." For some of the young, the stresses of life proved too great; they are in our jails and mental hospitals. Others have been denied the opportunity to decide the course of their lives because they are mentally retarded or handicapped. Were not many of these injured children?

Our definition of "injury" also should include injuries which do not result from a single life encounter, but stem from several incidents or the repetition of a single event. The manifestations of such injuries may be delayed or consequences may accumulate with the passage of time. Injuries, moreover, do not have to be measurable, since existing research methods may be unsatisfactory, or we may be unable to isolate the injury for study. An injury may even manifest all of these characteristics, for example, one caused by racial discrimination. Injuries in this framework may be invisible to the general population, immune to present systems of quantitative labeling, and may even take several years before being recognized as injuries.

Forum 13 was composed of six physicians, a nutritionist, a social worker, a safety expert, a minister, a dentist, a nurse, three students, and an attorney. Since each member approached "injuries" from the viewpoint of his particular discipline, the concept of "injury" as a physical impairment was no longer adequate, and our expanded definition became necessary.

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In broadening the definition of injury, a basic premise immediately developed that has affected our views and resulting recommendations. *Injuries to children, whether physical, psychological, social, or environmental, cannot and should not be isolated from the environments or human settlements which precipitate them.* Since characteristics of the total physical and social environment determine the types and prevalence of injuries, we must shift the emphasis from the child who suffers the accident to the child/environment interaction where the accident occurs.

While reviewing countless research efforts over the past months, however, we were astonished by the paucity of data on those factors within human beings and human settlements that increase the probability of childhood injury. The common tack in injury research seems to be to gather data on an injured population and then look for causes in the environment in which the injury occurred -- most often a measurable, visible, and immediate factor. Although this technique may indicate the magnitude of certain types of injuries, it seldom concentrates on the underlying elements leading to injury and does not provide enough corollary material from which to develop remedial actions.

Dividing into four work groups, each dealing with a particular human settlement (center city, intermediate-sized city, suburbia, and rural America), Forum 13 began identifying those elements within environments that hold injury potential for the nation's children. These elements include the automobile, dwellings, education and socialization, the environment, family living, health

care and facilities, institutionalization, physical injuries, and products.

> The Automobile -- its increase in numbers and usage, inadequate child safety devices, air pollution, increasing speed limits, and increased land allocated to roads and highways.

Heavy traffic on inner-city streets has great injury potential, but responsibility for ensuring our children's safety is diffused. If a child is struck by a car while playing on a busy inner-city street, whose fault is it? We could blame the child for "not being careful," the parent for not properly supervising the child, or the driver for not exercising due caution. Yet, other factors may be equally responsible: the speed limits and traffic management patterns, the automobile's braking power, and zoning laws responsible for eating up open spaces, leaving the child nowhere to play but the street.

If America were to become a child-oriented nation, it is doubtful that automobiles would continue to grow in importance and numbers until we could solve, not simply control, the pedestrian, speed, safety, land usage, and pollution problems. Streets, for example, could be enclosed, or even placed underground to exclude children from the dangers of the automobile.

> Dwellings -- including lead poisoning, unsafe products, fire hazards, egress limitation, noise levels, lack of privacy, poor sanitation, poor heating and ventilation, lack of safety and

health inspection and enforcement, inadequate and inappropriate building codes, rats and vermin, and substandard structures.

Children receive the vast majority of their physical injuries in or near the home. What should be the safest and least stressful environment for our nation's children is, in actuality, the most dangerous. It is not merely substandard or minimal structures which are to blame. Whether the human settlement is an inner city or a rural farm, home design and home products offer innumerable injury hazards to the growing child.

Schools and other public buildings are often designed for ease of maintenance rather than injury prevention. One wonders how many architects have ever positioned themselves at a child's eye level to see what children see in their buildings.

A society reflects a true respect for children only if it puts physical and psychological protection of children above the square foot cost for houses, buildings, schools, and hospitals.

Education and Socialization -- psychological stress; dropouts; increasing use of educational technology; emphasis on contact sports and achievement competition at earlier ages; emphasis on early boy/girl socialization and dating; social segregation and discrimination; street gangs; lack of first-aid training in schools; child prostitution; increasing leisure time; promiscuity and venereal disease; early exposure to drugs, crime, and violence.

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The National Commission on the Mental Health of Children[3] has amply documented the existing and worsening crisis in the mental health of our children. These injuries are at the same time the most complex and simplest to relate to the hostility of our environments. They are tragically symptomatic of the fact that America's children are being asked to adapt to too much too quickly. It is this forum's opinion that this nation should contain human settlements that nurture children from dependency to independency; such environments would respect the child's capacity to adapt.

> The Environment -- population migration and transciency, lack of recreational and open spaces, high industrial land usage, air and water contamination, noise levels, crowding and congestion, sprawl or unplanned growth.

Noise pollution is quickly becoming as severe a crisis as air or water pollution. Research indicates that human beings can be harmed both physically (hearing loss) and psychologically (stress) by the constant bombardment of unwanted sound. Since noise producers include transportation systems, industries, home products, and people themselves, responsibility is diffused, and any solution will require a coordinated effort. And even if stringent noise controls are instituted, values of American consumers -- a buying public that likes its purchases to exhibit "the sound of power" -- must be altered.

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[3] Crisis in Child Mental Health: Challenge for the 1970's. Harper and Row, 1969.

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Family Living -- divorce and separation, child battering, lack of religious training, unwanted and unplanned pregnancies, abortion, sex education, inadequate supervision, poverty, over-indulgence, children born out of wedlock and/or abandoned.

Parental supervision is seldom sufficient to protect children from all inappropriate stresses. Our children's needs should be viewed as a total societal responsibility, and in partial fulfillment of this responsibility society should help any family with problems.

Health Care and Facilities -- poor nutrition; inequitable care distribution and eligibility requirements; prematurity; variances in quality; lack of trauma centers, high-risk nurseries, and prenatal and postnatal care; and maternal and fetal infections.

Three basic priorities are currently used to measure progress in health care, particularly for children. Although the philosophical ordering of these priorities can be debated, in actuality (as exhibited by such factors as the allocation of funds) they fall into the following order: the cost of care, the availability of care, and the quality of care. Cost/benefit studies in far too many programs replace qualitative evaluation.

If America, in philosophy and action, were to assume the human settlement approach toward its children, the envisioned health care system would be decidedly different. The availability

of care for all children would be a "given," regardless of cost, and people would no longer be satisfied with "adequate" programs -- a word that has too often become synonomous with "best."

Institutionalization -- emotional stress resulting from residing in hospitals, penal detention centers, institutions for the mentally ill and retarded, or orphanages.

Children who enter institutions for short- or long-term care are often accommodated in obsolete and unaesthetic structures, and in far too many instances care stops with "housing."

Physical Injuries -- physical injuries and impairments due to motor vehicle accidents, poisoning and ingestion, falls, electrocutions and burns, firearm injuries, drownings, and animal and insect bites.

The concern of Forum 13 regarding the magnitude of physical injuries has already been mentioned, and we are not alone in our concern. Yet empathy has not led to sufficient action. Although some inroads have been made, monetary commitments have been inadequate on all levels. In 1970 the most damning proof of all is that accidents still remain the number one killer of children. In a child-oriented human settlement, physical injuries would be be viewed as symptoms of environmental deficiences to be corrected by the adult community.

Products -- their development and marketing, lack of self-imposed regulations by manufacturers, advertising, and confusion about liability.

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In its 1970 report to the president and Congress, the National Commission on Product Safety states:

> After considering the many forces contributing to the toll of injuries in and around the home, we have concluded that the greatest promise for reducing risks resides in energizing the manufacturer's ingenuity.
>
> We do not mean that manufacturers by themselves can do all that is needed to achieve an optimal safety record. We mean that with Government stimulation they can accomplish more for safety with less effort and expense than any other body -- more than educators, the courts, regulatory agencies, or individual consumers.
>
> Manufacturers can design, build, and market products that will reduce if not eliminate most unreasonable and unnecessary hazards. The capacity of individual manufacturers to devise safety programs, without undue extra cost, has been repeatedly demonstrated, for example, in safety glass, double-insulated power tools, baffles on rotary mowers, noncombustible TV transformers, and releases on wringer washers.[4]

However, the Commission's report and history suggest that such changes are rarely made without pressure.

In an "ideal" environment, such a report would be sufficient to elicit action. Whether America's manufacturers will accept this challenge remains to be seen.

For American children, human environments or settlements range from the high density, multiple dwelling arrangement of central cities to isolated rural life, and their home settings may include several siblings or none at all, both parents or neither, and many other variables. While the child constantly interacts with various environments, he is unable to radically alter them to

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[4]National Commission on Product Safety, Final Report, June 1970. United States Government Printing Office, Washington, D. C.

minimize or prevent injury to himself. He has little influence on conditions such as divorced or separated parents, inner city tenements, rural farms, racially biased schools, poverty, busy city streets, lack of family physician, the nomadic wanderings of migrant workers, street gangs, three family cars, contaminated water or air, sexual abuse, and religious instruction.

Requiring children to adapt to new situations fosters their mental and psychological growth. This is basically what is involved in learning: adapting past experience and knowledge to new demands. Therefore, it is far from desirable (and indeed another form of injury) for children to be raised in a static environment.

But even though a gap should exist between what a child encountered "yesterday" and what he encounters "today," a child's adaptability is definitely limited, depending on his developmental stage and past experiences. If the gap is too narrow, developmental stagnation and even regression result; if the gap is too broad, frustration and stress are the outcome.

The fact that accidents have remained the number one killer of children for over a decade, compounded by the growing social problems visible among the nation's children, indicates that our children are being asked to adapt to too much, too quickly.

Captive and susceptible, the children of America must depend on others to shape their environments. In far too many instances, however, they have become victims and have been forced to adapt to environments which do not meet their needs and which increase the potential for injury.

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We, as a nation, must do everything we can to prevent physical, psychological, and social injuries to children. When injuries do occur, their severity or duration must be minimized, and all our resources must be made available to treat them.

Concern for the rights and needs of children must be shared by the nation. To replace the currently fragmented childhood injury approaches with a coordinated effort, responsibility must be assumed by community representatives, elected officials, professionals, and the business and commercial leaders who strongly influence our settlements, the same settlements that frequently no longer serve children but threaten them.

RECOMMENDATIONS

Federal Level

We recommend that the president, as our leading citizen, initiate national interest and concern for children who are or might be injured. Individualistic as the American people seem to be, they do respond to firm leadership, particularly when they sense that a situation exceeds their individual capabilities.

We urge that the child advocacy system be established in the executive branch of the government so the voice of children, particularly the injured, may be heard at the highest national level. Since the complex problem of children's injuries cannot be solved by any one department of the federal government, the advocacy system would foster the necessary interdepartmental cooperation.

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One small but significant step toward instilling the concept that prosperity is measured, not in commercial or economic, but in human values can be made by *appointing a key adviser to the president on matters relating to children.* We further ask that the executive branch *study the feasibility of a cabinet level position with major responsibility for meeting the needs and protecting the rights of the nation's greatest resource -- its children.*

We recommend that *Congress establish a nonpartisan, nonelective permanent staff to study the problems of America's children.* The rights and privileges of children cannot be properly represented as ad hoc issues or in debates on appropriations, labor and welfare, general health, or other such matters. Fragmentation, poor distribution of services, and the low priority given to the nation's children deserve prominent attention and increased sensitivity from our senior elected body.

The responsibility for preventing, minimizing, and managing child injuries extends far beyond executive endorsement and legislative mandate. It includes the operational departments of the federal government which are primarily responsible for the interpretation and implementation of policy and mandate. They must immediately confront problems which obviously threaten the well-being of children; subtle research topics should be reserved for long-term study, but action should not always wait for the results of those studies. Economic and commercial growth must not be set up as national goals without considering what effect, if unchallenged, this growth will have on the nation's children.

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There is little evidence of active and ongoing coordination among various federal departments on the problems of children. Since the programs of any single department cannot solve the child injury crisis, all departments must coordinate their programs and exchange information.

State Level

At the level of the state government we urge that the same three recommendations be instituted, namely:

1. that the governor of each state establish a child advocacy system to protect the state's children from psychological, social, and environmental injury
2. that state legislatures establish a non-partisan, nonelective permanent staff to study and advise the legislature on the rights and needs of the state's children
3. that all state agencies, whether directly or indirectly involved with children, become sensitized to the problems of children and give children a higher priority in planning and programs.

Local Level

Considering all the forces that mold our settlements, action must begin with the local community and neighborhood, and the

basic decision-making process must remain with counties, cities, and townships. Therefore, we recommend that governmental units closest to the neighborhood throughout the nation select individuals to be trained in problem-solving techniques and informed about available resources related to children's injuries. Once trained, advocates would return to their own communities to help reduce the incidence and severity of psychological, sociological, environmental, and physical injuries affecting children.

To assist communities in solving their own problems, state and federal governments, actively aided by private and volunteer organizations, must develop training programs and ongoing consultation for these selected community workers.

Established patterns must be altered, and we must break with traditional techniques. We must bring the problem of the injured child closer to home and remove it from the position of high, but casually regarded, death statistics.

This program is not expected to be costly. Depending on the number of community workers trained, the federal program would cost from $3 to $5 million. Scholarships and fellowships would hopefully be made available to disadvantaged communities, and program guidelines should be permissive, requiring only the expressed interest of the county, city, or township.

We cannot determine how many injuries this investment will prevent or minimize. However, inroads must be made against the growing hostility of our settlements. Otherwise, a high percentage

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of the nation's future citizens will be environmentally, psychologically, sociologically, and physically injured because America failed to protect its children and mistakenly assumed adaptability to be a limitless human quality.

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